

NH DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE DIRECTIVE	CHAPTER <u>Health Services</u> STATEMENT NUMBER <u>6.47</u>
SUBJECT: EMERGENCY MEDICAL RESPONSE PROPONENT: <u>Robert MacLeod, Administrative Dir.</u> <small>Name/Title</small> <u>Medical/Forensic Services 271-3707</u> <small>Office Phone #</small>	EFFECTIVE DATE <u>02/15/06</u> REVIEW DATE <u>04/15/07</u> SUPERSEDES PPD# <u>6.47</u> DATED <u>0415/04</u>
ISSUING OFFICER: <u>William Wrenn, Commissioner</u>	DIRECTOR'S INITIALS _____ DATE _____ APPENDIX ATTACHED: YES _____ NO _____
REFERENCE NO: See reference section on last page of PPD.	

I. PURPOSE:

To provide a structured response to medical emergencies.

II. APPLICABILITY:

To all staff

III. POLICY:

It is the policy of Department of Corrections to ensure that medical emergencies are handled in the most expeditious manner consistent with security and safety, when it appears that direct transport to an emergency room is more appropriate than interim transport to the Health Service Center. It is also departmental policy that correctional and health care providers are trained to respond to health related emergencies within four minutes.

IV. PROCEDURE:

A. When any staff member encounters a person that requires emergency medical attention, the staff member will:

1. Secure the scene;
2. Contact their Central Control by radio or by telephone and declare a medical emergency at the particular location for the following reason(s):
 - a. Unconscious person
 - b. No breathing;
 - c. Severe bleeding;
 - d. Complaints associated with a heart attack (chest pain with or without nausea, sweating, and pain from chest to jaw or down either or both arms, etc.);
 - e. Seizures that last more than 5 minutes, return or result in injury
3. Initiate First Aid/CPR; continue until assistance arrives;
4. Confirm contact with Central Control Room and give the following information:
 - a. Patient's name, symptoms/condition, approximate age and weight;

B. Steps for each facility's Central Control Room after receiving initial emergency call:

1. Contact ambulance and relay the following:
 - a. Access point;
 - b. Patient's symptoms/condition, age, and weight, if known.
2. Contact the Shift Commander and Health Service Center.
- C. Steps for Shift Commander after receiving emergency call:
 1. Coordinate an access site for ambulance;
 2. Prepare for transportation of the inmate from site;
 3. Dispatch an officer to ambulance access point for escort;
 4. Contact site OIC to secure area of incident;
 5. Designate transport officers to accompany ambulance with appropriate equipment to retain security.
- D. Steps for Health Service Center after receiving call from the facility's Central Control Room:
 1. The nurse in charge will dispatch a nurse with emergency equipment to the site to assess the person, time permitting, or communicate pertinent information to on-site personnel.
 2. The Health Service staff will advise the ambulance staff of any updated information at the scene or as soon as possible.
 3. Nursing assistance at the scene may come from the nursing location that is best able to respond.
- E. Emergency medical response under ideal or normal conditions:
 1. CO/staff discovers a person with a medical emergency.
 2. CO/staff informs the Central Control Room via radio or telephone.
 3. The facility's Central Control Room will notify Fire Dispatch of the medical emergency and request an ambulance, then notify the Health Service Center and Shift Commander.
 4. Prior to the arrival of the ambulance, the nurse responds with emergency equipment and takes over care of the inmate.
 5. The Shift Commander ensures access and security for the ambulance.
 6. The nurse remains with the inmate until the inmate is turned over to the care and responsibility of the ambulance crew.
 7. An incident report will be filled out by Health Services staff and security and sent to the Shift Commander, Quality Assurance at Department Headquarters, and the Administrator of Medical and Forensic Services.
- F. At sites with no nursing staff on duty, security staff will contact an ambulance and have the inmate taken to the nearest hospital. After the ambulance departs, security staff will notify the on-duty nurse at the Health Service Center located at NH State Prison.
- G. In cases of unexpected/untimely death within the facility:
 1. The investigations officer will assume responsibility for the integrity of the site and body. (Refer to PPD 6.07 for expected death.)
 2. The responding nurse, when it is clear there are no further care responsibilities, will return to Health Service Center and enter a progress note in the health record.
 3. In accordance with investigative procedures, the medical examiner will be notified for pronouncement of death and any further directives as deemed necessary.

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards

Standards for Adult Probation and Parole Field Services
Third Edition. Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards

4-4351; 4-4389

Standards for Adult Community Residential Services
Fourth Edition Standards

4-ACRS-4C-04

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Other: